

ROCKLIN ADULT SPORTS OFFICIAL PLAYERS ROSTER

ALL PLAYERS MUST READ THE WAIVER ON THE REVERSE SIDE OF THIS FORM AND SIGN THE ROSTER BELOW

By signing my name below, I affirm that I have carefully read the release and indemnity agreement, on the reverse of this roster, and fully understand its contents. I am aware that this is a release of liability and agreement to indemnify the City and I sign it of my own free will.

	PRINT NAME	SIGNATURE	RESIDENTIAL ADDRESS (Street, City & Zip)	PHONE #	AGE
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